



DOCKET NO. BIO-178  
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Assaf Govari et al.

Serial No.: 10/629,660

Art Unit: 3737

Filed : July 29, 2003

Examiner:

For : ENERGY TRANSFER AMPLIFICATION FOR INTRABODY DEVICES

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

December 1, 2003

(Date of Deposit)

Robert Deberardine

(Name of applicant, assignee, or Registered Representative)

(Signature)

December 1, 2003

(Date of Signature)

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P.O. Box 1450  
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SUBMISSION OF COMBINED DECLARATION AND POWER OF ATTORNEY

Dear Sir:

Pursuant to Rule 53(f) and Rule 54, please find enclosed a Combined Declaration and Power of Attorney for the application of Assaf Govari et al. entitled ENERGY TRANSFER AMPLIFICATION FOR INTRABODY DEVICES attorney Docket No.BIO-178, to complete, pursuant to Rule 51, this application filed on July 29, 2003 by Express Mail pursuant to Rule 10. As required, a copy of the Notice to File Missing Parts of Application is also attached.

Please charge Johnson & Johnson Deposit Account No. 10-0750/BIO-178/LJC in the amounts of \$130.00 for submission of the Declaration pursuant to Section 1.16(e). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 10-0750/BIO-178/LJC. This sheet is submitted in triplicate.

Respectfully submitted,

Robert Deberardine  
Reg. No. 32,853  
Attorney for Applicant(s)

Johnson & Johnson  
One Johnson & Johnson Plaza  
New Brunswick, NJ 08933-7003  
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PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

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**DECLARATION  
AND  
POWER OF ATTORNEY  
FOR UTILITY OR DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration Submitted with Initial Filing       Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required)  
OR

Attorney Docket Number	BIO-178
First Named Inventor	Assaf Govari
<b>COMPLETE IF KNOWN</b>	
Application Number	10/629,660
Filing Date	July 29, 2003
Group Art Unit	3737
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**ENERGY TRANSFER AMPLIFICATION FOR INTRABODY DEVICES**  
*(Title of the Invention)*

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) **07/29/2003** as United States Application Number or PCT International Application Number

**10/629,660** and was amended on (MM/DD/YYYY)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

**DECLARATION - Utility or Design Patent Application**

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

<b>Application Number(s)</b>	<b>Filing Date (MM/DD/YYYY)</b>	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

<b>Application Serial No.</b>	<b>Filing Date</b>	<b>Status</b>
		Patented Patented Patented

I hereby appoint:

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AND

Practitioner(s) named below:  
Name   Registration Number  

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Louis J. Capezzuto at telephone number (732) 524-2218.

Customer Number  
Direct all correspondence to:  or Bar Code Label **000027777** OR  Correspondence address below

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Country: <u> </u>	Telephone: <u> </u>	Fax: <u> </u>

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Assaf		Family Name or Surname Govari		
Inventor's Signature		Date 18. 11. 2003		
Residence: City Haifa	State	Country Israel	Citizenship Israel	
Mailing Address Vitzo 1				
City Haifa	State	ZIP 34400	Country Israel	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any]) Michael		Family Name or Surname Levin		
Inventor's Signature		Date 18. 11. 2003		
Residence: City Haifa	State	Country Israel	Citizenship Israel	
Mailing Address 12 Simtat Rodan St.				
City Haifa	State	ZIP 35590	Country Israel	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.				
NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle [if any])		Family Name or Surname		
Inventor's Signature		Date		
Residence: City	State	Country	Citizenship	
Mailing Address				
City	State	ZIP	Country	